MAY 1 5 2006 CE TERRITORY

PTO/SB/17 (01-08) Approved for use through 1/31/2000 OMB 0651-0032 U.S. Patent and Trademark Omco: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays alvalid OMB control number Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818) 10/735,181-Conf. #2581 Application Number FEE TRANSMITTAL December 12, 2003 Filing Date For FY 2006 Yasutoshi Nishimura First Named Inventor Examiner Name L. K. Bui 3728 Applicant claims small entity status. See 37 CFR 1.27 Art Unit 00597/0200639÷US0 TOTAL AMOUNT OF PAYMENT Attorney Docket No 1,220,00 METHOD OF PAYMENT (check all that apply) Other (please identify) x Check Credir Card Money Order Deposit Account Number, 04-0100 Disposit Account Na Darby & Darby P.C For the above-identified deposit account, the Director is horoby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below Charge any additional fee(s) or underpayment of Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) 1. BASIC FILING, SEARCH, AND EXAMINATION FEES SEARCH FEES **EXAMINATION FEES** FILING FEES **Small Entity** Small Entity Small Entity Fee (\$) Fees Paid (\$) Fee (\$) Foo (\$) Application Type Fee (\$) Fee (\$) Fee (\$) 250 200 100 150 500 Utility 300 130 65 200 100 100 50 Design 160 80 150 Plant 200 100 300 250 600 300 150 500 Reissue 300 Provisional 300 Small Entity 2. EXCESS CLAIM FEES Foc (\$) Fee (\$) Fee Description 50 25 Each claim over 20 (including Reissucs) 200 100 Each independent claim over 3 (including Reissues) 360 180 Multiple dependent claims Fee Paid (\$) Multiple Dependent Claims Extra Claims Total Claims Fee (\$) Fée Paid (\$) 4 x 50.00 200 00 Fee (\$) TIP - highest number of total claims paid for it greater than 20. Fco Pald (\$) Indep. Claims Extra Claims Foc (\$) 3 - 3 highest number of independent claims paid for it greater than 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Fee Paid (\$) Number of each additional 50 or fraction thereof Fee (\$) Extra Sheets **Total Sheets** (round up to a whole number) x Fees Paid (\$) 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1253 Extension for response within third month 1,020.00 SUBMITTED BY (212) 527-7700 19,165 Telephone Signature May 15, 2006 Gordon D. Coplein Name (Print/Type)

{W.\00597\0200639us0\00744452.DOC \*005970200639US0\* }

Express Mail Label No.

MAY 1 5 2006 W

AMENDMENT TRANSMITTAL LETTER							Docket No. 00597/0200639-US0	
Application No 10/735,181-Conf #2581		Filing Date December 12, 2003			Examiner L. K Bui		Art Unit 3728	
Applicant(s): Yasu	<u> </u>	ra et al.						
					LINO SUEET	AND DIV	/IDED	
Invention: MEDICINE WRAPPING MACHINE, MEDICINE WRAPPING SHEET, AND DIVIDED WRAPPING BAG								
TO THE COMMISSIONER FOR PATENTS								
Transmitted herewith is an amendment in the above-identified application.								
The fee has been calculated and is transmitted as shown below.								
CLAIMS AS AMENDED								
	Remaining After	Number	Number Extra Claims			:	! ! <b>!</b>	
ļ	Amondment	Paid	Present		50.00	·	200.00	
Total Claims		- 25 =	<del>                                     </del>	<u></u>		· +-		
Claims	3	- 3_=	!	<u>x</u>				
Multiple Depend	ent Clalms (ch	eck if applicab	le)			<u>-</u> .		
Other fee (please specify): Extension for response within third month							1,020 00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:							1,220.00	
x Large Entity Small Entity								
No additional fee is required for this amendment.								
Please charge Deposit Account No. 04-0100 in the amount of \$								
A duplicate copy of this sheet is enclosed.								
x A check in the amount of \$ 1,220.00 to cover the filing fee is enclosed.								
Payment by credit card. Form PTO-2038 is attached.								
The Director is hereby authorized to charge and credit Deposit Account No								
Credit any overpayment.								
Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17								
Low C: Corlen Dated: May 15, 2006								
Gordon D Coplein Attorney/Agent Reg. No.: 19,165								
DARBY & DARBY P.C.								
P.O. Box 5257								
New York, New York 10150-5257 (212) 527-7717								
						į		
						:		
Express Mail Label No		Date	3:			:		
18						<u></u>		

{W:\00597\0200639us0\00744454.DOC +005970200639US0\*}

IFW \$



Application No. (if known): 10/735,181

Attorney Docket No.: 00597/0200639-ÚS0

## Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. in an envelope addressed to: EV835934380W

> Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

May 15, 2006

S. Sow	ıtını			
st. St	unture Untini			
Typed or printed name of	person signing Certificate			
Registration Number, if applicable	Telephone Number			

Note:

Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Fee Transmittal (1 page)

Three Month Request for Extension of Time Under 37 CFR 1.136(a) (1

Amendment in Response to Non-Final Office Action (7 pages)

Amendment Transmittal (1 page)

Check in the amount of \$1,220.00 # 1/871

Return Receipt Postcard